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CONFIRMATION NO. 1209

Bib Data Sheet

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|-----------------------------|-----------------------------------|--------------|------------------------|--|
| SERIAL NUMBER 09/839,734 | FILING DATE 04/20/2001 RULE | CLASS 370 | GROUP ART UNIT 2661 | ATTORNEY DOCKET NO. WEST14-00030 |
|-----------------------------|-----------------------------------|--------------|------------------------|--|

APPLICANTS

Paul F. Struhsaker, Plano, TX;

Yes - D1

** CONTINUING DATA *****

THIS APPLN CLAIMS BENEFIT OF 60/270,430 02/21/2001
 AND CLAIMS BENEFIT OF 60/262,712 01/19/2001
 AND CLAIMS BENEFIT OF 60/262,825 01/19/2001
 AND CLAIMS BENEFIT OF 60/262,698 01/19/2001
 AND CLAIMS BENEFIT OF 60/262,827 01/19/2001
 AND CLAIMS BENEFIT OF 60/262,826 01/19/2001
 AND CLAIMS BENEFIT OF 60/262,951 01/19/2001
 AND CLAIMS BENEFIT OF 60/262,824 01/19/2001
 AND CLAIMS BENEFIT OF 60/263,101 01/19/2001
 AND CLAIMS BENEFIT OF 60/263,097 01/19/2001
 AND CLAIMS BENEFIT OF 60/273,579 03/05/2001
 AND CLAIMS BENEFIT OF 60/262,955 01/19/2001
 AND CLAIMS BENEFIT OF 60/262,708 01/19/2001
 AND CLAIMS BENEFIT OF 60/273,689 03/05/2001
 AND CLAIMS BENEFIT OF 60/273,757 03/05/2001
 AND CLAIMS BENEFIT OF 60/270,378 02/21/2001
 AND CLAIMS BENEFIT OF 60/270,385 02/21/2001

** FOREIGN APPLICATIONS *****

*None - D1*IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 06/14/2001

| | | | | | |
|---------------------------------|--|------------------------|---------------------|--------------------|-------------------------|
| Foreign Priority claimed | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY TX | SHEETS DRAWING 4 | TOTAL CLAIMS 14 | INDEPENDENT CLAIMS 2 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>D1</i> | | | | |
| Verified and Acknowledged | Examiner's Signature <i>D1</i> Initials | | | | |

ADDRESS

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TITLE

Method for establishing a priority call in a fixed wireless access communication system

| |
|-----------------------------------|
| <input type="checkbox"/> All Fees |
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